



Hyderabad Institute of Theology and Apologetics

ACADEMIC REFERENCE FORM

Name and Address of the Applicant:

Waiver: I voluntarily waive my right to access the information provided on this form.

(Applicant's Signature)

(Date)

To the referee:

The Admission Committee gives serious consideration to the reference for pursuing theological studies at HITHA and keeps it in strict confidence. Our primary concern is to take people who are called by God for such training and have the discipline to develop and use their spiritual gifts. We greatly appreciate your honest and careful consideration of the applicant. After completely filling out this reference form at your earliest possible convenience, please return it **DIRECTLY** to the Academic Dean, HITHA. Thank you.

	Excellent	Good	Average	Poor	Do Not Know
Physical Condition					
Sociability					
Leadership					
Perseverance					
Teachability					
Flexibility					
Hard working					
Teamwork					
Integrity					

Please comment on the applicant's aptitude for this programme.

Please comment on the applicant's strengths and areas needing improvement

Do you have any reason to doubt the applicant's personal integrity? If so, please specify.

How do you recommend the applicant for admission to HITHA.

- Recommended with enthusiasm Recommended Not recommended
 Recommended with reservations Please contact me for further information

Please furnish the following information about yourself.

Signature:

Date Filled:

Name (CAPITALS):

Address:

Phone:

Fax:

E-mail: